ARIZONA FORM
120S

Arizona S Corporation Income Tax Return

2000

120S		For taxable year beginning MM / DD / YYYY, and ending MM / DD / YYYY.								Orio	CHECK ONE Original			
		Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079								5116	CHECK ONE			
							,		Calendar year Tiscal year					
Bus	siness telephone number	Please	Name							Federa	emplo	yer ID nur	nber (FEI	N)
()	print	Number and street							AZ withholding tax number				
Bus	siness activity code number	or type	reambor and street						712 Withinording tax fluthibet					
	om federal Form 1120S)								AZ transaction privilege tax number					
69	Check box if: This	s is a first re	a first return Name change Address change							OOR use	only		_	
					7									
Α	Is this the corporation's final Arizona return? If yes, check one: Dissolved Withdrawn Merged/Reorganized Merged/Reorganized													
	•			ryanized										
_	List FEIN of the successor		-											
В	·		ess within and without Arizona?	Yes	No									
С	Will a composite return be filed on Form 140NR?													
D	Total number of nonresident individual shareholders					- [81]								
Ε	Total number of resident in		<u> </u>											
F	Total number of entity sha	otal number of entity shareholders (See instruction page 3)				CHECK BOX IF: Federal extension use					d to file return. 82 F			
1	Total distributive income (le	oss) - <i>from t</i>	federal Form 1120S, Schedule K								1			00
	mplete lines 2-11 only if the	ne S corpora	ation has excess net passive ir	ncome or capital o	gains/built	-in gai	ns. A	n S cor	poration	that is				
			he S corporation has a tax liab					r has el	ected to		<u>efunda</u>	able tax o	redits.	
2	•					-	2			00				
3 4			te income tax - <i>add lines 2 and 3</i>				3 TI∩N	S GO T	O LINE 1	00	4			00
5			e attach schedule. MULTISTATE								5			00
6	• • •		from line 4. Multistate corporation								6			00
7			edule B instructions. Multistate co											
8	Income apportioned to Ariz	ona - <i>line 6</i>	multiplied by line 7. Multistate cor	rporations only	<u>-</u>						8			00
9			ach schedule. Multistate corporat	•							9			00
0			dd lines 8 and 9								10			00
1			e income tax. Wholly Arizona S c at from line 10										1	00
2	•		pleting this line								11 12			00
2			n Form 300, Part II, line 24								13			00
4											14			00
5			Check this box to send \$5 to the											
	Enter the amount of the tax	reduction									15			00
6			na Form 300, Part II, line 47								16			00
7	Credit type - enter form nul	mber for eac	th credit claimed 17	3	3	J L	3	Ш	3				1	0.0
8			15 and 16 from line 14 INSTRUCTIONS BEFORE CON								18 19			00
9 20			redit - <i>subtract line 19 from line 1</i>								20			00
21			S				21				20			UU
2			h refundable credit claimed			 		3		3				
23	Extension payment made v	vith Form 12	0EXT - see instructions				23			00				
24	Estimated tax payments m	ade with For	m 120ES - see instructions				24			00				
25			24. Amended returns - see instruc								25			00
26		•	than line 25, enter balance of tax								26			00
27		-	than line 20, enter overpayment								27			00
18 19	3		nd interest. <i>If Form 220 is attach</i>								28 29			00
0			und - <i>see instructions</i>								30			00
1			ny return								31			00
2			······								32			00
3			estimated tax			[33			00				
4	Amount to be refunded - sa	ubtract line 3	33 from line 32								34			nn